PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

FP03-161US

CLAIMS AS FILED - PART I							SMALL ENTITY			OTHER THAN		
			(Column 1)		(Column 2)			TYPE [OR	SMALL	
TOTAL CLAIMS			7				-	RATE	FEE		RATE	FEE
FC)R		NUMBER FILED		NUMB	ER EXTRA		BASIC FEE	385.00	OR	BASIC FEE	770.00
TC	TAL CHARGEA	BLE CLAIMS	7 minus 20=		*	<i>\omega</i>		X\$ 9=		OR	X\$18=	O
	EPENDENT CL		/ minus 3 =		*	U		X43=		OR	X86=	0
MULTIPLE DEPENDENT CLAIM PRESENT								+145=		OR	+290=	0
* If the difference in column 1 is less than zero,					"0" in c	olumn 2		TOTAL		OR	TOTAL	770
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALL	ENTITY	OR	OTHER SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X43=		OR	X86=	
	FIRST PRESE	NTATION OF M	JUIPLE DEF	ENDEN	CLATIVI		, [+145=		OR	+290=	
							L	TOTAL		OR	.TOTAL	
			ADDIT. FEE			ADDIT. FEE						
_		(Column 1)	T	(Colur		(Column 3) I	d r		ADDI-			ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL
	Total	*	Minus	**		=		X\$ 9= .		OR	X\$18=	
	Independent	*	Minus	***		=		X43=		OR	X86=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							445			+290=	
							Į	+145=	_	OR	70741	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	EST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		= .		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=] [X43=		OR	X86=	
٩	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											
* If the ntry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+290=	
* If the ntry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "High st Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
	The "Liebort Min-	has Braviauchi Pai	id For (Total o	Indonand	ant) ic the	highest numb	or fou	nd in the and	propriate box	k in col	umn 1.	